

FROM :

RECEIVED
CENTRAL FAX CENTER

FAX NO. :6104379150

May. 17 2007 09:42AM P2

MAY 17 2007

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/01 (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63) Declaration
Submitted
With Initial
Filing

OR

 Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	APL-03-05-US
First Named Inventor	Reza Yacoob
<i>COMPLETE IF KNOWN</i>	
Application Number	10/581,378
Filing Date	November 30, 2004
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CRYO-PROTECTIVE AGENTS FOR MICROORGANISMS

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) 11/30/2004 as United States Application Number or PCT InternationalApplication Number 10/581,378 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			<input type="checkbox"/>	

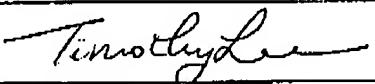
 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO 9199 and select option 2.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number _____		<input checked="" type="checkbox"/> Correspondence address below
Name Reza Yacoob, Sanofi Pasteur Limited		
Address 1755 Steeles Avenue Wcst		
City Toronto	State Ontario	ZIP M2R 3T4
Country CA	Telephone 416-667-2869	Fax 416-667-2459
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.		
NAME OF SOLE OR FIRST INVENTOR: Given Name (first and middle [if any]) Tim		<input type="checkbox"/> A petition has been filed for this unsigned inventor Family Name or Surname Lee
Inventor's Signature 	Date 6 May 2007	
Residence: City Toronto	State Ontario	Country CA
Citizenship CA		
Mailing Address 7 Seneca Hill Drive		
City Toronto	State Ontario	ZIP M2J 2W1
Country CA		
NAME OF SECOND INVENTOR: Given Name (first and middle [if any])		<input type="checkbox"/> A petition has been filed for this unsigned inventor Family Name or Surname
Inventor's Signature	Date	
Residence: City	State	Country
Citizenship		
Mailing Address		
City	State	ZIP
Country		
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02I.R attached hereto.		

[Page 2 of 2]